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BLACK LOWE GRAHAM

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Intellectual Property Attorneys

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FACSIMILE COVER SHEET

FAX TO: Examiner Le  
FACSIMILE NO: 571-273-8300  
SUBJECT: U.S. PATENT NO. 10/644,693  
OUR REFERENCE: AAIR-1-1005  
FROM: Wendy Saxby for Lawrence D. Graham  
DATE: March 28, 2006

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MESSAGE: Dear Examiner Lc:

Attached please find the Supplemental Response to the Office Action dated September 8, 2005.

The contents of this facsimile are privileged and confidential and intended only for the named recipient. If you received this facsimile in error, please notify us immediately by telephone and either destroy this copy or return it to us by mail.

This facsimile is 11 pages in length, including the cover sheet.  
Please call Wendy Saxby at 206.957.2461 immediately if any pages need to be retransmitted.

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PTO/SB/21 (04-04)

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<b>TRANSMITTAL FORM</b>	
(To be used for all correspondence after initial filing)	
Total Number of Pages in This Submission	Attorney Docket Number
10/644,693	
August 20, 2003	
Anderson, Jeffrey L.	
2876	
Le, Uyen Chau N.	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Supplemental Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CU(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Black Lowe & Graham, PLLC		
Signature			
Printed name	Lawrence D. Graham		
Date	February 21, 2006	Reg. No.	40,001

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Wendy Saxby
Date February 21, 2006	

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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E70/6B/17 (12-04)

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FEE TRANSMITTAL For FY 2005		Complete If Known					
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27		Application Number	10/644,693				
		Filing Date	August 20, 2003				
		First Named Inventor	Anderson, Jeffrey L.				
		Examiner's Name	Le, Uyen Chau N.				
		Art Unit	2876				
		Attorney Docket No.	AAIR-1-1005				
TOTAL AMOUNT OF PAYMENT (\$)		0					
METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
<input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> Deposit Account Number: 501050		Deposit Account Name: Black Lowe & Graham, PLLC					
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee					
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES				Small Entity			
<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25		200	100		100
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	360	180					
Multiple dependent claims				Multiple Dependent Claims			
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 or HP =	x	=		-			
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	-			
- 3 or HP =	x	=		-			
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE				Fee Paid (\$)			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)							
for each additional 10 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(b).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 10 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 100 =	/ 10 =	(round up to a whole number) x					
4. OTHER FEE(S)				Fees Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)							
Other:							

Submitted By Signature	<i>Lawrence D. Graham</i>	Registration No. (Attorney/Agent)	40,001	Telephone 206.381.3300
Name (Print/Type)	Lawrence D. Graham			Date February 21, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which it is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1600, Alexandria, VA 22313-1600. DO NOT SEND FEE'S OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MAR 28 2006

Applicant: Jeffrey L. Anderson

Attorney Docket No. AAIR-1-1005

Serial No.: 10/644,693

Group Art Unit: 2876

Filing Date: August 20, 2003

Examiner: Le, Uyen Chau N.

Title: AIRPORT CHECK-IN SYSTEM AND METHOD

SUPPLEMENTAL RESPONSE TO OFFICE ACTION

TO THE COMMISSIONER OF PATENTS:

This paper responds to the office action mailed September 8, 2005.

A listing of the claims begins at page 2 of this paper.

Remarks begin at page 8 of this paper.

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